

**Political Organization  
Notice of Section 527 Status**

OMB No. 1545-1693

**Part I General Information**

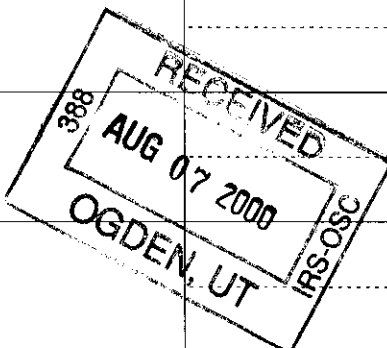
1 Name of organization <b>BRUCE KYLE Campaign</b>		Employer identification number <b>36 4382191</b>
2 Mailing address (P.O. Box or number, street, and room or suite number) <b>1423 SANDRA DR.</b>		
City or town, state, and ZIP code <b>FT. MYERS FL 33901</b>		
3 E-mail address of organization <b>BRUCE KYLE@aol.com</b>		
4a Name of custodian of records <b>BRUCE KYLE</b>	4b Custodian's address <b>1423 Sandra Dr. FT. MYERS, FL 33901</b>	
5a Name of contact person <b>BRUCE KYLE</b>	5b Contact person's address <b>1423 SANDRA DR. FT. MYERS, FL 33901</b>	
6 Business address of organization (if different from mailing address shown above). Number, street, and room or suite number		
City or town, state, and ZIP code		

**Part II Purpose**

7 Describe the purpose of the organization  
**RE-ELECTORAL Campaign for State House seat 23**

**Part III List of All Related Entities (see instructions)**

8a Name of related entity	8b Relationship	8c Address
<b>N/A</b>		



[illegible]

Sign  
Here

Signature of authorized official

Date \_\_\_\_\_

Form **8871** (7-2000)